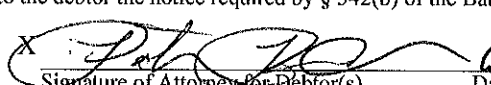
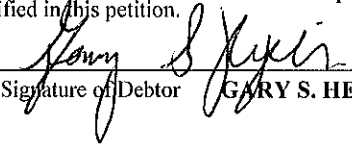



United States Bankruptcy Court Northern District of Illinois Eastern Division							Voluntary Petition				
Name of Debtor (if individual, enter Last, First, Middle): HEFLIN, GARY S.				Name of Joint Debtor (Spouse) (Last, First, Middle):							
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):				All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):							
Last four digits of Soc. Sec. No. / Complete EIN or other Tax I.D. No. (if more than one, state all): XXX-XX-2632				Last four digits of Soc. Sec. No. / Complete EIN or other Tax I.D. No. (if more than one, state all):							
Street Address of Debtor (No. & Street, City, and State) 10256 S. BEVERLY CHICAGO, IL				Street Address of Joint Debtor (No. & Street, City, and State):				ZIP CODE 60643		ZIP CODE	
County of Residence or of the Principal Place of Business: COOK				County of Residence or of the Principal Place of Business:							
Mailing Address of Debtor (if different from street address):				Mailing Address of Joint Debtor (if different from street address):				ZIP CODE		ZIP CODE	
Location of Principal Assets of Business Debtor (if different from street address above):				ZIP CODE							
Type of Debtor (Form of Organization) (Check one box.)		Nature of Business (Check all applicable boxes)			Chapter or Section of Bankruptcy Code Under Which the Petition is Filed (Check one box)						
<input checked="" type="checkbox"/> Individual (includes Joint Debtors) <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and provide the information requested below.) State type of entity:		<input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Nonprofit Organization qualified under 26 U.S.C. § 501(c)(3)			<input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding <input checked="" type="checkbox"/> Chapter 13						
Filing Fee (Check one box)		Nature of Debts (Check one box)			Chapter 11 Debtors						
<input type="checkbox"/> Full Filing Fee Attached <input checked="" type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b) See Official Form 3A <input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		<input checked="" type="checkbox"/> Consumer/Non-Business <input type="checkbox"/> Business			Check one box: <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2 million.						
Statistical/Administrative Information										THIS SPACE IS FOR COURT USE ONLY	
<input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.											
Estimated Number of Creditors											
Estimated Assets											
Estimated Debts											

Voluntary Petition (This page must be completed and filed in every case)		Name of Debtor(s): GARY S. HEFLIN	
Prior Bankruptcy Case Filed Within Last 8 Years (If more than one, attach additional sheet)			
Location Where Filed: NORTHERN DISTRICT OF ILLINOIS		Case Number: 06 B 717	Date Filed: 01/27/2006
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)			
Name of Debtor: NONE		Case Number:	Date Filed:
District:		Relationship:	Judge:
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11) <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code.  Signature of Attorney for Debtor(s) Date 6/19/06 Patience R. Clark 6282669	
Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No		Certification Concerning Debt Counseling by Individual/Joint Debtor(s) <input checked="" type="checkbox"/> I/we have received approved budget and credit counseling during the 180-day period preceding the filing of this petition. <input type="checkbox"/> I/we request a waiver of the requirement to obtain budget and credit counseling prior to filing based on exigent circumstances (Must attach certification describing.)	
Information Regarding the Debtor (Check the Applicable Boxes) Venue (Check any applicable box) <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Statement by a Debtor Who Resides as a Tenant of Residential Property <i>Check all applicable boxes.</i> <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following). _____ (Name of landlord that obtained judgment) _____ (Address of landlord) <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of this petition.			

Voluntary Petition (This page must be completed and filed in every case)		Name of Debtor(s): GARY S. HEFLIN	
Signatures			
Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition]- I have obtained and read the notice required by § 342(b) of the Bankruptcy Code. I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. X <u></u> Signature of Debtor GARY S. HEFLIN X Not Applicable Signature of Joint Debtor Telephone Number (If not represented by attorney) <u>6-19-06</u> Date		Signature of a Foreign Representative of a Recognized Foreign Proceeding I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.) <input type="checkbox"/> I request relief in accordance with chapter 15 of Title 11, United States Code. Certified Copies of the documents required by § 1515 of title 11 are attached. <input type="checkbox"/> Pursuant to § 1511 of title 11, United States Code, I request relief in accordance with the Chapter of title 11 specified in the petition. A certified copy of the order granting recognition of the foreign proceeding is attached. X Not Applicable (Signature of Foreign Representative) (Printed Name of Foreign Representative) Date	
Signature of Attorney X <u></u> Signature of Attorney for Debtor(s) Patience R. Clark, 6282669 Printed Name of Attorney for Debtor(s) / Bar No. Brookins & Wilson Firm Name 100 N. LaSalle Street Suite 1710 Address Chicago, IL 60602 (312) 360-0888 (312) 360-0893 Telephone Number <u>6/19/06</u> Date		Signature of Non-Attorney Petition Preparer I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. §110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached. Not Applicable Printed Name and title, if any, of Bankruptcy Petition Preparer Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. 110.) Address X Not Applicable Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above. Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. <i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.</i>	
Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. X Not Applicable Signature of Authorized Individual Printed Name of Authorized Individual Title of Authorized Individual Date			

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois
Eastern Division

In re: **GARY S. HEFLIN**
XXX-XX-2632

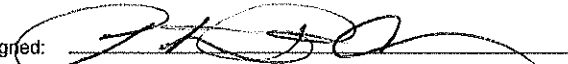
Case No. **06 B 00717**
Chapter **13**

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s), or debtor's attorney if applicable, do hereby certify under penalty of perjury that the attached Master Mailing List of creditors, consisting of 1 sheet(s) is complete, correct and consistent with the debtor's schedules pursuant to Local Bankruptcy Rules and I/we assume all responsibility for errors and omissions.

Dated: **6-19-06**

Signed: 
GARY S. HEFLIN

Signed: 
Patience R. Clark
Bar No. **6282669**

QUAKER OATS CREDIT UNION
3535 CENTER POINT ROAD NE
CEDAR RAPIDS, IA 52402

ACTIVE CREDIT SERVICES, INC.
PO BOX 22329
PORTLAND, OR 97269-2329

AMERICAN EXPRESS
C/O SWICKER & ASSOCIATES, PC
800 FEDERAL STREET
ANDOVER, MASSACHUSETTS 01810

AMERICAN EXPRESS
PO BOX 360002
FT. LAUDERDALE, FL 33336-0002

AMERICAN EXPRESS TRAVEL
C/O NATIONWIDE CREDIT, INC.
2015 VAUGHN ROAD NW, BLD. 300
KENNESAW, GA 30144-7801

BANK OF AMERICA
C/O ENCORE RECEIVABLE MANAGEMEN
400 N. ROGERS ROAD
PO BOX 3330
OLATHE, KS 66063

FIRST NATIONAL BANK
PO BOX 2951
OMAHA, NE 68103-2951

CAPITAL ONE BANK
C/O NCO FINANCIAL SYSTEMS INC.
32275 32ND AVENUE SOUTH
FEDERAL WAY, WA 98001-9616

CAPITAL ONE BANK PLATINUM MAST
PO BOX 790216
ST. LOUIS, MO 63179-0216

CAPITAL ONE BANK PLATINUM VISA
PO BOX 790216
ST. LOUIS, MO 63179-0216

CARDIOVASCULAR CONSULTANTS
2850 WEST 95TH STREET
EVERGREEN PARK, IL 60805

CARDIOVASCULAR CONSULTANTS, LL
C/O PHYSICIANS BILLING SERVICE
8200 WEST 95TH STREET
EVERGREEN PARK, IL 60805-2701

CARMAX AUTO FINANCE
P.O. BOX 440609
KENNESAW, GA 30160-9511

CHASE
CARDMEMBER SERVICE
PO BOX 15153
WILMINGTON, DE 19886-5153

CHASE
CARDMEMBER SERVICES
PO BOX 15153
WILMINGTON, DE 19886-5153

COLUMBIA HOUSE
1400 N. BRUTRIDGE AVENUE
TERRE HAUTE, INDIANA 47811

DISCOVER CARD
PO BOX 30395
SALT LAKE CITY, UT 84130-0395

EVERGREEN EMERGENCY SERVICES,
PO BOX 428080
EVERGREEN PARK, IL 60805

HARLEY DAVIDSON FINANCIAL SERVICE
P.O. BOX 21908
CARSON CITY, NV 89721

LITTLE COMPANY OF MARY HOSPITAL
HEALTH CARE CENTERS
DEPT. 77-97677
CHICAGO, IL 60678-7677

MBNA AMERICA
PO BOX 15102
WILMINGTON, DE 19886-5102

QUAKER OATS CREDIT UNION
C/O GARDINER & COMPANY
10555 NEW YORK AVENUE
DES MOINES, IA 50322

QUAKER OATS CREDIT UNION
C/O DAVID COHEN
55 W. MONROE STREET
SUITE 600
CHICAGO, IL 60603

QUEST DIAGNOSTICS
1290 WALL STREET WEST
LYNDHURST, NJ 07071

RADIOLOGY IMAGING SPECIALISTS,
PO BOX 70
HINSDALE, IL 60522

SUMMERLAKE VILLAGE
APARTMENTS
C/O NATIONAL CREDIT SYSTEMS
P.O. BOX 312125
ATLANTA, GA 31131